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CONFIRMATION NO. 7824

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/542,983		514	1618	AML/13131.19

APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/CA04/00073 01/21/2004
 which claims benefit of 60/441,156 01/21/2003

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **
 08/22/2006

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		QC	0	20	1
Verified and Acknowledged	/HASAN SYED AHMED/ Examiner's Signature	Initials				

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TITLE

Oral dosage formulation

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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